



## KIRKENDALL PUBLIC LIBRARY FOUNDATION DONATION FORM

### DONOR INFORMATION

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

GIFT AMOUNT AND PURPOSE	MEMORIAL & TRIBUTES
<p>Enclosed is my gift of \$ _____ to support library services in Ankeny.</p> <p>I would like to direct my gift to:</p> <p><input type="checkbox"/> Where the need is greatest</p> <p><input type="checkbox"/> Book purchases</p> <p><input type="checkbox"/> Media acquisitions</p> <p><input type="checkbox"/> Coffee area development</p> <p><input type="checkbox"/> Other: _____</p>	<p>This is a special gift:</p> <p><input type="checkbox"/> In Memory of: _____</p> <p><input type="checkbox"/> In Honor of _____</p> <p>Please send an acknowledgement to the honoree or next of kin listed:</p> <p>Name(s) _____</p> <p>Address: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p>Day Phone: _____</p> <p>Evening Phone: _____</p>

### GIFT PAYMENT

- ☐ My check is enclosed payable to the Kirkendall Library Foundation.
- ☐ Please bill my credit card: (Visa, Master Card, Discover or American Express)

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on card (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

### OTHER INFORMATION

- ☐ This gift will be matched by my employer: \_\_\_\_\_  
(Please enclose form or mail separately.)
- ☐ Please keep my gift anonymous. I understand that I will not be included in donor listings.

#### *Please mail to:*

**Kirkendall Library Foundation**

**1210 NW Prairie Ridge Drive**

**Ankeny, Iowa 50023**

Ph: 515-965-6463

Email: [library.foundation@ankenyiowa.gov](mailto:library.foundation@ankenyiowa.gov)

*Thank you for supporting the Kirkendall Public Library Foundation. Your gift is tax-deductible to the extent of the law, as the Foundation holds a 501(c)(3) U.S. Federal tax exemption.*